

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Making Investments Majority Insured PAC

ADDRESS (number and street)

9070 Irvine Center Drive, #150

Check if different  
than previously  
reported. (ACC)

Irvine

CA

92618

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00564658

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report (Q1)July 15  
Quarterly Report (Q2)October 15  
Quarterly Report (Q3)January 31  
Year-End Report (YE)July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

C

(d) 30-Day  
POST-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

C

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Slater, Jen, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Slater, Jen, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Making Investments Majority Insured PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
01 / 01 / 2018 To: M M / D D / Y Y Y Y Y Y  
03 / 31 / 2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2018</span>		<span style="border: 1px solid black; padding: 2px;">48386.76</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">48386.76</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">147000.89</span>	<span style="border: 1px solid black; padding: 2px;">147000.89</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">195387.65</span>	<span style="border: 1px solid black; padding: 2px;">195387.65</span>
7. Total Disbursements (from Line 31).....	<span style="border: 1px solid black; padding: 2px;">98928.96</span>	<span style="border: 1px solid black; padding: 2px;">98928.96</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<span style="border: 1px solid black; padding: 2px;">96458.69</span>	<span style="border: 1px solid black; padding: 2px;">96458.69</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**Making Investments Majority Insured PAC**

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y  
01 / 01 / 2018

To:

M M / D D / Y Y Y Y Y  
03 / 31 / 2018

**I. Receipts**

**COLUMN A**  
**Total This Period**

**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

10000.00

10000.00

(ii) Unitemized .....

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

10000.00

10000.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

50500.00

50500.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5).....▶

60500.00

60500.00

## 12. Transfers From Affiliated/Other

Party Committees.....

86500.89

86500.89

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)).....▶

147000.89

147000.89

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19).....▶

147000.89

147000.89

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	44428.96	44428.96
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	44428.96	44428.96
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	23500.00	23500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	31000.00	31000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	98928.96	98928.96
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	98928.96	98928.96

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	60500.00	60500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	60500.00	60500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	44428.96	44428.96
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	44428.96	44428.96

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 39  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Hobbs, David, , ,**

Mailing Address 1903 Mallinson Way

City  
Alexandria

State  
VA

Zip Code  
22308

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
The Hobbs Group, LLC

Occupation (for Individual)  
Public Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2018

**Transaction ID : INCA468**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Morongo Band of Mission Indians**

Mailing Address 12700 Pumarra Rd

City  
Banning

State  
CA

Zip Code  
92220

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2018

**Transaction ID : INCA477**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Askew, Whitaker, , ,**

Mailing Address 7614 Holiday Dr

City  
Alexandria

State  
VA

Zip Code  
22308

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Subject Matter

Occupation (for Individual)  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2018

**Transaction ID : INCA489**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

4500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Meyer, Daniel P., , ,**

Mailing Address 3900 Picardy Ct

City  
Alexandria

State  
VA

Zip Code  
22308

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
The Duberstein Group

Occupation (for Individual)  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2018

**Transaction ID : INCA494**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Lapinski, Mathew, , ,**

Mailing Address 1210 R Street NW, #304

City  
Washington

State  
DC

Zip Code  
20009

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Crossroads Strategies

Occupation (for Individual)  
Executive Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 28 / 2018

**Transaction ID : INCA506**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Sycuan Band of the Kumeyaay Nation**

Mailing Address 2 Kwaaypaay Ct

City  
El Cajon

State  
CA

Zip Code  
92019

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 28 / 2018

**Transaction ID : INCA514**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

4500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 39  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Cox, Christopher C., , ,**

Mailing Address 2205 Windsor Rd

City  
Alexandria

State  
VA

Zip Code  
22307

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NRA Institute for Legislative Action

Occupation (for Individual)  
Executive Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2018

**Transaction ID : INCA518**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

10000.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. Comcast Corp & NBC Universal PAC**

Mailing Address One Comcast Center  
1701 JFK Blvd

City  
Philadelphia

State  
PA

Zip Code  
19103

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 06 / 2018

**Transaction ID : INCA465**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Edison International PAC**

Mailing Address 2244 Walnut Grove Ave

City

Rosemead

State  
CA

Zip Code  
91770

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 06 / 2018

**Transaction ID : INCA464**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. American Chemistry Council PAC**

Mailing Address 700 Second St NE

City

Washington

State  
DC

Zip Code  
20002

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2018

**Transaction ID : INCA470**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

7500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
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☐ 11a ☐ 11b ☒ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. BluePAC - Blue Cross & Blue Shield Assn PAC**

Mailing Address 1310 G St NW 12th Fl

City  
Washington

State  
DC

Zip Code  
20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2018

**Transaction ID : INCA471**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. CBS Corporation PAC**

Mailing Address 801 Pennsylvania Ave NW Ste 450

City  
Washington

State  
DC

Zip Code  
20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2018

**Transaction ID : INCA473**

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. Comcast Corp & NBC Universal PAC**

Mailing Address One Comcast Center  
1701 JFK Blvd

City  
Philadelphia

State  
PA

Zip Code  
19103

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2018

**Transaction ID : INCA472**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶

**TOTAL** This Period (last page this line number only).....▶

6500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. Emergent Biosolutions Inc. PAC**

Mailing Address 400 Professional Dr Ste 400

City  
Gaithersburg

State  
MD

Zip Code  
20879

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2018

**Transaction ID : INCA469**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. AT&T Inc Federal PAC**

Mailing Address 208 S Akard St Ste 2701

City  
Dallas

State  
TX

Zip Code  
75202

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 05 / 2018

**Transaction ID : INCA480**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. Occidental Petroleum Corporation PAC**

Mailing Address 1701 Pennsylvania Ave NW Ste 800

City  
Washington

State  
DC

Zip Code  
20006

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 13 / 2018

**Transaction ID : INCA485**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

10000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 12 OF 39

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. Raytheon PAC**

Mailing Address 1100 Wilson Blvd Ste 1500

City  
Arlington

State  
VA

Zip Code  
22209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2018

**Transaction ID : INCA486**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. GAP Inc PAC**

Mailing Address 2 Folsom St

City

San Francisco

State  
CA

Zip Code  
94105

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2018

**Transaction ID : INCA491**

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. RetailPAC**

Mailing Address 325 7th St NW Ste 1100

City

Washington

State  
DC

Zip Code  
20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2018

**Transaction ID : INCA490**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

9000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☐ 11a ☐ 11b ☒ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. Swisher International Inc PAC**

Mailing Address 459 E 16th St

City  
Jacksonville

State  
FL

Zip Code  
32206

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2018

**Transaction ID : INCA495**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. UPSPAC**

Mailing Address 55 Glenlake Pkwy NE

City  
Atlanta

State  
GA

Zip Code  
30328

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2018

**Transaction ID : INCA497**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. More Conservatives Pac (McPAC)**

Mailing Address 228 S Washington St Ste 115

City  
Alexandria

State  
CA

Zip Code  
22314

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 28 / 2018

**Transaction ID : INCA509**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

10000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. PricewaterhouseCoopers PAC**

Mailing Address 600 13th St NW Ste 1000

City  
Washington

State  
DC

Zip Code  
20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2018

**Transaction ID : INCA510**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Vertex Pharmaceuticals Inc PAC**

Mailing Address 1050 K St NW Ste 1125

City  
Washington

State  
DC

Zip Code  
20001

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2018

**Transaction ID : INCA513**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

7500.00

50500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. Mimi Walters Victory Fund**

Mailing Address 9070 Irvine Center Drive, #150

City  
Irvine

State  
CA

Zip Code  
92618

FEC ID number of contributing  
federal political committee.

**C** C00564674

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

86500.89

Date of Receipt

**03** / **31** / **2018**

**Transaction ID : INCA519**

Amount of Each Receipt this Period

86500.89

☐ Memo Item

Transfer of Proceeds from Joint Fundraiser

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Jordan, Daniel G., , ,**

Mailing Address 12341 Sunset Blvd

City

Los Angeles

State  
CA

Zip Code  
90049

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Christensen, Glaser, Fink, Jacobs, Wei

Occupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

**01** / **31** / **2018**

**Transaction ID : IDTA82**

Amount of Each Receipt this Period

1400.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. Danco, Thomas P., , ,**

Mailing Address 11150 Santa Monica Blvd, #800

City

Los Angeles

State  
CA

Zip Code  
90025

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Thomas P. Danco Consulting

Occupation (for Individual)  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03** / **06** / **2018**

**Transaction ID : IDTA78**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

86500.89

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Dirk, Mary J., , ,**

Mailing Address 1808 S Bayfront

City  
Balboa Island

State  
CA

Zip Code  
92662

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Troy Group

Occupation (for Individual)

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2018

**Transaction ID : IDTA80**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Dirk, Patrick, , ,**

Mailing Address 1808 S Bay Front

City  
Balboa Island

State  
CA

Zip Code  
92662

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Troy Group

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2018

**Transaction ID : IDTA79**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Hillgren, Susan, , ,**

Mailing Address 135 Harbor Island Rd

City  
Newport Beach

State  
CA

Zip Code  
92660

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Susan Hillgren

Occupation (for Individual)

Journalist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2018

**Transaction ID : IDTA81**

Amount of Each Receipt this Period

3300.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Kennedy, Elizabeth, , ,**

Mailing Address 1717 Bayadere Terrace

City

Corona Del Mar

State

CA

Zip Code

92625

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

None

Occupation (for Individual)

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2018

**Transaction ID : IDTA83**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Larkin, Jr, Thomas E., , ,**

Mailing Address 736 Via Lido Nord

City

Newport Beach

State

CA

Zip Code

92663

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Tommar, LLC

Occupation (for Individual)

Investment Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 12 / 2018

**Transaction ID : IDTA84**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Larkin, Tom, , ,**

Mailing Address 5515 Heather Lane

City

Newport Beach

State

CA

Zip Code

92660

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Spective

Occupation (for Individual)

Founder

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 12 / 2018

**Transaction ID : IDTA128**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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☐ 11a ☐ 11b ☐ 11c ☒ 12  
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NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Troesh, Carol A., ,**

Mailing Address 1370 Jet Stream Dr, #100

City  
Henderson

State  
NV

Zip Code  
89052

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
None

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 12 / 2018

**Transaction ID : IDTA86**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Troesh, Dennis, ,**

Mailing Address 1370 Jet Stream Dr, #100

City  
Henderson

State  
NV

Zip Code  
89052

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
None

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 12 / 2018

**Transaction ID : IDTA87**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Dodson, Gilbert, ,**

Mailing Address 4255 Country Club

City  
Long Beach

State  
CA

Zip Code  
90807

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Corridor Recycling

Occupation (for Individual)  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2018

**Transaction ID : IDTA88**

Amount of Each Receipt this Period

2300.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☐ 11a ☐ 11b ☐ 11c ☒ 12  
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NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Ueberroth, Peter, , ,**

Mailing Address PO Box 100

City  
Laguna Beach

State  
CA

Zip Code  
92652

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Peter Ueberroth

Occupation (for Individual)  
Business Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2018

**Transaction ID : IDTA89**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Ueberroth, Virginia, , ,**

Mailing Address 688 N Coast Hwy, #250

City  
Laguna Beach

State  
CA

Zip Code  
92651

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
None

Occupation (for Individual)  
Volunteer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2018

**Transaction ID : IDTA92**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Matros, Richard, , ,**

Mailing Address 14 Scenic Bluff

City  
Newport Coast

State  
CA

Zip Code  
92657

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Sabra Health Care REIT

Occupation (for Individual)  
Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2018

**Transaction ID : IDTA91**

Amount of Each Receipt this Period

4200.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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☐ 11a ☐ 11b ☐ 11c ☒ 12  
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NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Neal, Robert, , ,**

Mailing Address 4100 Newport Place Suite 820

City  
Newport Beach

State  
CA

Zip Code  
92660

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Hager Pacific

Occupation (for Individual)  
Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 22 / 2018

**Transaction ID : IDTA90**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Booth, Lynn, , ,**

Mailing Address 10431 Bellagio Rd

City  
Los Angeles

State  
CA

Zip Code  
90077

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Lynn Booth

Occupation (for Individual)  
Private Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 28 / 2018

**Transaction ID : IDTA93**

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Beall, Donald, , ,**

Mailing Address 161 Shorecliff Rd

City  
Corona Del Mar

State  
CA

Zip Code  
92625

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Dartbrook Partners, LLC

Occupation (for Individual)  
Chairman Emeritus

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 29 / 2018

**Transaction ID : IDTA94**

Amount of Each Receipt this Period

1000.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Saunders, John, , ,**

Mailing Address 4040 MacArthur Blvd Ste 300

City  
Newport Beach

State  
CA

Zip Code  
92660

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Saunders Properties

Occupation (for Individual)  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2018

**Transaction ID : IDTA95**

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Burke, Karen, , ,**

Mailing Address 73 Monarch Bay

City  
Dana Point

State  
CA

Zip Code  
92629

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
None

Occupation (for Individual)  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2018

**Transaction ID : IDTA98**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Burke, Peter, , ,**

Mailing Address 73 Monarch Bay

City  
Dana Point

State  
CA

Zip Code  
92629

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Loomworks Apparel

Occupation (for Individual)  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2018

**Transaction ID : IDTA97**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 OF 39  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Horowitz, David, , ,**

Mailing Address 27241 La Paz Rd Ste B

City

Laguna Niguel

State

CA

Zip Code

92677

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Horowitz Group

Occupation (for Individual)

CEO/Chairman

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2018

**Transaction ID : IDTA100**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Horowitz, Michelle, , ,**

Mailing Address 27241 La Paz Rd Ste B

City

Laguna Niguel

State

CA

Zip Code

92677

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Michelle Horowitz

Occupation (for Individual)

Investor

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2018

**Transaction ID : IDTA101**

Amount of Each Receipt this Period

4600.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Mastrocola, John R., , ,**

Mailing Address 29881 Hiddenwood

City

Laguna Niguel

State

CA

Zip Code

92677

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Main Line Marketing and Management

Occupation (for Individual)

Health Care Consultant

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2018

**Transaction ID : IDTA96**

Amount of Each Receipt this Period

2700.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 39  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**Parks, James R., , ,**

Mailing Address 10474 Santa Monica Blvd

City  
 Los Angeles

State  
 CA

Zip Code  
 90025

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 CBIZ MHM, LLC

Occupation (for Individual)  
 Executive Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03** / **30** / **2018**

**Transaction ID : IDTA99**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address

City

State

Zip Code

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address

City

State

Zip Code

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

86500.89

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 39

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Mailing Address 26831 Aliso Creek Rd

City  
Aliso ViejoState  
CAZip Code  
92656Purpose of Disbursement  
Bank Fee

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	5			2	0	1	8		

FEC Identification Number

C

**Transaction ID : EXPB457**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Campaign Compliance Group, Inc.**

Mailing Address 9070 Irvine Center Drive, #150

City  
IrvineState  
CAZip Code  
92618Purpose of Disbursement  
Financial Analyst

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	7			2	0	1	8		

FEC Identification Number

C

**Transaction ID : EXPB461**

Amount of Each Disbursement this Period

1200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Secretary of State**

Mailing Address 1500 11th Street, Room 495

City  
SacramentoState  
CAZip Code  
95814Purpose of Disbursement  
Yearly Fee

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	0			2	0	1	8		

FEC Identification Number

C

**Transaction ID : EXPB456**

Amount of Each Disbursement this Period

50.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1275.00



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 25 OF 39

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address P.O.Box 981540

City  
El PasoState  
TXZip Code  
79998Purpose of Disbursement  
Shipping Costs

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	3			2	0	1	8		

FEC Identification Number

C

**Transaction ID : EXPB458**

Amount of Each Disbursement this Period

44.64

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Federal Express**

Mailing Address Payment Center

City  
MemphisState  
TNZip Code  
38101Purpose of Disbursement  
Shipping Costs

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	3			2	0	1	8		

FEC Identification Number

C

**Transaction ID : EDTB12EXPE**

Amount of Each Disbursement this Period

44.64

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Capitol Tech Solutions**

Mailing Address 2131 Capitol Ave, #306

City  
SacramentoState  
CAZip Code  
95816Purpose of Disbursement  
Credit Card Processing Fees

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	0			2	0	1	8		

FEC Identification Number

C

**Transaction ID : EXPB476**

Amount of Each Disbursement this Period

70.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

115.14

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 26 OF 39

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

Full Name (Last, First, Middle Initial)

**A. Campaign Compliance Group, Inc.**

Mailing Address 9070 Irvine Center Drive, #150

City  
IrvineState  
CAZip Code  
92618Purpose of Disbursement  
Financial Analyst

001

Category/  
Type

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	1			2	0	1	8		

FEC Identification Number

C

**Transaction ID : EXPB462**

Amount of Each Disbursement this Period

1200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Cardmember Services**

Mailing Address PO BOX 94014

City  
PalatineState  
ILZip Code  
60094Purpose of Disbursement  
Credit Card Payment

001

Category/  
Type

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	2			2	0	1	8		

FEC Identification Number

C

**Transaction ID : EXPB463**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. The New Majority**

Mailing Address 2350 Kerner Blvd #250

City  
San RafaelState  
CAZip Code  
94901Purpose of Disbursement  
Membership Costs

001

Category/  
Type

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	2			2	0	1	8		

FEC Identification Number

C

**Transaction ID : EDTB13EXPI**

Amount of Each Disbursement this Period

5000.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6200.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 27 OF 39

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

Full Name (Last, First, Middle Initial)

**A. Red River Co LLC**

Mailing Address 8501 Bayside Rd, Suite C4-D

City  
Chesapeake BeachState  
MDZip Code  
20732Purpose of Disbursement  
Event & Travel Costs

003

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	3				2	0	1	8

FEC Identification Number

C

Transaction ID : EXPB474

Amount of Each Disbursement this Period

6575.43

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address PO Box 619612

City  
DallasState  
TXZip Code  
90014Purpose of Disbursement  
Airfare Costs

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	3				2	0	1	8

FEC Identification Number

C

Transaction ID : PDTB8EXPB4

Amount of Each Disbursement this Period

1230.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Hertz Rental**

Mailing Address 3400 E Tahquitz Canyon Way

City  
Palm SpringsState  
CAZip Code  
92262Purpose of Disbursement  
Rental Car Costs

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	3				2	0	1	8

FEC Identification Number

C

Transaction ID : PDTB9EXPB

Amount of Each Disbursement this Period

350.14

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6575.43

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 28 OF 39

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

Full Name (Last, First, Middle Initial)

**A. Uline**

Mailing Address P.O. Box 88741

City  
ChicagoState  
ILZip Code  
60680Purpose of Disbursement  
Event Supplies

003

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	3				2	0	1	8

FEC Identification Number

C

Transaction ID : PDTB10EXPE

Amount of Each Disbursement this Period

111.72

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Amazon**

Mailing Address 1200 12th Avenue S, Suite 1200

City  
SeattleState  
WAZip Code  
98144Purpose of Disbursement  
Event Supplies

003

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	3				2	0	1	8

FEC Identification Number

C

Transaction ID : PDTB11EXPE

Amount of Each Disbursement this Period

13.53

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Federal Express**

Mailing Address Payment Center

City  
MemphisState  
TNZip Code  
38101Purpose of Disbursement  
Shipping Costs

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	3				2	0	1	8

FEC Identification Number

C

Transaction ID : PDTB12EXPI

Amount of Each Disbursement this Period

19.05

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 29 OF 39

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

Full Name (Last, First, Middle Initial)

**A. Ritz Carlton**

Mailing Address 68900 Frank Sinatra Dr

City  
Rancho MirageState  
CAZip Code  
92270Purpose of Disbursement  
Event Deposit

003

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	3		2	0	1	8		

FEC Identification Number

C

Transaction ID : PDTB13EXPE

Amount of Each Disbursement this Period

1000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Bank of America**

Mailing Address 26831 Aliso Creek Rd

City  
Aliso ViejoState  
CAZip Code  
92656Purpose of Disbursement  
Bank Fee

001

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	8		2	0	1	8		

FEC Identification Number

C

Transaction ID : EXPB483

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Campaign Compliance Group, Inc.**

Mailing Address 9070 Irvine Center Drive, #150

City  
IrvineState  
CAZip Code  
92618Purpose of Disbursement  
Financial Analyst

001

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	8		2	0	1	8		

FEC Identification Number

C

Transaction ID : EXPB478

Amount of Each Disbursement this Period

1200.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1210.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 30 OF 39

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

Full Name (Last, First, Middle Initial)

**A. Capitol Tech Solutions**

Mailing Address 2131 Capitol Ave, #306

City  
SacramentoState  
CAZip Code  
95816Purpose of Disbursement  
Credit Card Processing Fees

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		28		2018

FEC Identification Number

C

**Transaction ID : EXPB492**

Amount of Each Disbursement this Period

70.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Cardmember Services**

Mailing Address PO BOX 94014

City  
PalatineState  
ILZip Code  
60094Purpose of Disbursement  
Credit Card Payment

002

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2018

FEC Identification Number

C

**Transaction ID : EXPB481**

Amount of Each Disbursement this Period

1066.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Delta Airlines**

Mailing Address 1030 Delta Blvd

City  
AtlantaState  
GAZip Code  
30354Purpose of Disbursement  
Travel Costs

002

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2018

FEC Identification Number

C

**Transaction ID : EDTB14EXPI**

Amount of Each Disbursement this Period

678.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1136.83

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 31 OF 39

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

Full Name (Last, First, Middle Initial)

**A. Hertz Rental**

Mailing Address 3400 E Tahquitz Canyon Way

City  
Palm SpringsState  
CAZip Code  
92262Purpose of Disbursement  
Travel Costs

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : EDTB15EXPE

Amount of Each Disbursement this Period

332.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 182 Howard Street #8

City  
San FranciscoState  
CAZip Code  
94105Purpose of Disbursement  
Travel Costs

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : EDTB16EXPE

Amount of Each Disbursement this Period

56.33

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. US Postmaster**

Mailing Address 15642 Sand Canyon Ave

City  
IrvineState  
CAZip Code  
92619Purpose of Disbursement  
Postage

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : EXPB482

Amount of Each Disbursement this Period

50.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

50.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 32 OF 39

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

Full Name (Last, First, Middle Initial)

**A. Red River Co LLC**

Mailing Address 8501 Bayside Rd, Suite C4-D

City  
Chesapeake BeachState  
MDZip Code  
20732Purpose of Disbursement  
Event Costs

003

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : EXPB487

Amount of Each Disbursement this Period

19921.06

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Big Horn Golf Club**

Mailing Address 255 Palowet Dr

City  
Palm DesertState  
CAZip Code  
92260Purpose of Disbursement  
Event Costs

003

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : PDTB17EXPE

Amount of Each Disbursement this Period

8317.27

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Federal Express**

Mailing Address Payment Center

City  
MemphisState  
TNZip Code  
38101Purpose of Disbursement  
Shipping Costs

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : PDTB15EXPI

Amount of Each Disbursement this Period

69.40

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1	9	9	2	1	.	0	6
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 33 OF 39

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

Full Name (Last, First, Middle Initial)

**A. Federal Express**

Mailing Address Payment Center

City  
MemphisState  
TNZip Code  
38101Purpose of Disbursement  
Printing Costs

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : PDTB14EXPE

Amount of Each Disbursement this Period

465.62

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Las Casuelas Nuevas**

Mailing Address 70050 CA-111

City  
Rancho MirageState  
CAZip Code  
92270Purpose of Disbursement  
Event Costs

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : PDTB16EXPE

Amount of Each Disbursement this Period

846.30

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Misc - No Vendor Aggregating over \$200**

Mailing Address

City

State

Zip Code

Purpose of Disbursement  
Misc Event Supply Costs

003

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : PDTB19EXPI

Amount of Each Disbursement this Period

286.64

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 34 OF 39

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

Full Name (Last, First, Middle Initial)

**A. Ritz Carlton**

Mailing Address 68900 Frank Sinatra Dr

City  
Rancho MirageState  
CAZip Code  
92270Purpose of Disbursement  
Event Costs

003

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : PDTB18EXPE

Amount of Each Disbursement this Period

9935.83

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Red River Co LLC**

Mailing Address 8501 Bayside Rd, Suite C4-D

City  
Chesapeake BeachState  
MDZip Code  
20732Purpose of Disbursement  
Fundraising Consulting Services

003

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : EXPB503

Amount of Each Disbursement this Period

6675.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Campaign Compliance Group, Inc.**

Mailing Address 9070 Irvine Center Drive, #150

City  
IrvineState  
CAZip Code  
92618Purpose of Disbursement  
Financial Analyst

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	0			2	0	1	8		

FEC Identification Number

C

Transaction ID : EXPB522

Amount of Each Disbursement this Period

1200.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

7875.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 35 OF 39

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

Full Name (Last, First, Middle Initial)

**A. Capitol Tech Solutions**

Mailing Address 2131 Capitol Ave, #306

City  
SacramentoState  
CAZip Code  
95816Purpose of Disbursement  
Credit Card Processing Fees

001

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	0			2	0	1	8		

FEC Identification Number

C

**Transaction ID : EXPB515**

Amount of Each Disbursement this Period

70.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.50

44428.96

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 36 OF 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

Full Name (Last, First, Middle Initial)

**A. Rick for Congress**

Mailing Address 404 Boston Hollow Rd

City  
ElizabethState  
PAZip Code  
15037Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Saccone, Rick, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA

District: 18

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	8			2	0	1	8		

FEC Identification Number

**C** C00658708**Transaction ID : EXPB459**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Rick for Congress**

Mailing Address 404 Boston Hollow Rd

City  
ElizabethState  
PAZip Code  
15037Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Saccone, Rick, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA

District: 18

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	9			2	0	1	8		

FEC Identification Number

**C** C00658708**Transaction ID : EXPB460**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Justin Fareed for Congress**

Mailing Address PO Box 5068

City  
Santa BarbaraState  
CAZip Code  
93150Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Fareed, Justin, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA

District: 24

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	6			2	0	1	8		

FEC Identification Number

**C** C00572560**Transaction ID : EXPB498**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

4500.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 37 OF 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

Full Name (Last, First, Middle Initial)

**A. Friends of Erik Paulsen for Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		27		2018

Mailing Address PO BOX 44369

City  
Eden PrairieState  
MNZip Code  
55344Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Paulsen, Erik, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State: MN District: 03

FEC Identification Number

C C00439661

**Transaction ID : EXPB505**

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Harkey for Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		27		2018

Mailing Address 31878 Del Obispo, #118-106

City  
San Juan CapistranoState  
CAZip Code  
92675Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Harkey, Diane, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 49

FEC Identification Number

C C00665513

**Transaction ID : EXPB500**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Harkey for Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		27		2018

Mailing Address 31878 Del Obispo, #118-106

City  
San Juan CapistranoState  
CAZip Code  
92675Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Harkey, Diane, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 49

FEC Identification Number

C C00665513

**Transaction ID : EXPB501**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

13000.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 38 OF 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

Full Name (Last, First, Middle Initial)

**A. Young Kim for Congress**

Mailing Address 9460 Tegner

City  
HilmarState  
CAZip Code  
95324Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Kim, Young, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA

District: 39

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		27		2018

FEC Identification Number

C

**Transaction ID : EXPB502**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Crescent Hardy for Congress**

Mailing Address PO Box 753941

City  
Las VegasState  
NVZip Code  
89136Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Hardy, Crescent, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: NV

District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		29		2018

FEC Identification Number

C

**Transaction ID : EXPB507**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

6000.00

**TOTAL** This Period (last page this line number only)..... ►

23500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 39 OF 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Making Investments Majority Insured PAC**

Full Name (Last, First, Middle Initial)

**A. Give Voters a Voice**

Mailing Address 455 Capitol Mall, Suite 600

City  
SacramentoState  
CAZip Code  
95814Purpose of Disbursement  
Contribution - Non Federal

011

Category/  
Type

Candidate Name

**Give Voters a Voice**Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		04		2018

FEC Identification Number

C

**Transaction ID : EXPB454**

Amount of Each Disbursement this Period

15000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Give Voters a Voice**

Mailing Address 455 Capitol Mall, Suite 600

City  
SacramentoState  
CAZip Code  
95814Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Give Voters a Voice**Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		27		2018

FEC Identification Number

C

**Transaction ID : EXPB479**

Amount of Each Disbursement this Period

15000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Bill Essayli for Assembly 2018**

Mailing Address 24651 Evereve Circle Suite 1

City  
Lake ForestState  
CAZip Code  
92630Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Essayli, Bill, , ,**Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		26		2018

FEC Identification Number

C

**Transaction ID : EXPB499**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

31000.00

31000.00